	irea to res	spond to a collection of information unless it displays a valid OMB control number  Complete if Known					
	re on 12/08/2004. ted Appropriations Act, 2005 (H.R. 4		4818).			)/577,337	Conf. No.: 5138
FEE TRA	ΔNS	MITTA		Application Numl	-	oril 28, 2006	COIII. 140 3130
			<b>.</b>	Filing Date		toshi NAOE	
For FY 2009				First Named Inve		S. WONG	
Applicant claims small e	entity status.	See 37 CFR 1.2	7	Examiner Name			
TOTAL AMOUNT OF PAYM	ENT (\$)	180.00	ļ	Art Unit		162	
TOTAL AMOUNT OF FATH	(a)	100.00		Attorney Docket	No. 12	248-0867PUS1	
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 02-2448  Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s)							
under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card							
information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING F	EES nall Entity	SEARC	CH FEES Small Entity	EXAMI	NATION FEE: Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$	Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	0.00
Design	220	110	100	50	140	70	0.00
Plant	220	110	330	165	170	85	0.00
Reissue	330	165	540	270	650	325	0.00
Provisional	220	110	0	0	0	0	0.00
2. EXCESS CLAIM FEES  Fee Description  Fee (\$) Fee (\$)							
Fee Description Each claim over 20 (including Reissues)						52	26
Each independent claim over 3 (including Reissues)						220	110
Multiple dependent claims						390	195
				<u>Paid (\$)</u> ).00		Multiple Fee (\$)	Dependent Claims Fee Paid (\$)
HP = highest number of total of							0.00
	Extra Claim			<b>Paid (\$)</b> 0.00			
- 3 or HP = HP = highest number of indepe	0 endent claims	X paid for, if greater th		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereor Fee (\$) Fee Faid (\$)  - 100 = 0 / 50 = 0 (round up to a whole number) x = 0.00							
4. OTHER FEE(S)  Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							0.00
Other (e.g., late filing surcharge): Submission of Information Disclosure Statement \$180.00							
SUBMITTED BY							
Signature Registration No. 29271 Telepi							phone 703-205-8000
Name (Print/Type) Charles Gorenstein Date June 9, 2011							

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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